



Patent
Attorney's Docket No. 033303-012

RCE/1648

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)
Prem S. PAUL et al.) Group Art Unit: 1648
Application No.: 09/810,501) Examiner: D. Wortman
Filed: March 19, 2001) Confirmation No.: 1105
For: POLYNUCLEIC ACIDS ISOLATED)
FROM A PORCINE)
REPRODUCTIVE AND)
RESPIRATORY SYNDROME VIRUS)
(PRRSV), PROTEINS ENCODED BY)
THE POLYNUCLEIC ACIDS,)
VACCINES BASED ON THE)
PROTEINS AND/OR)
POLYNUCLEIC ACIDS, A)
METHOD OF PROTECTING A PIG)
FROM A PRRSV AND A METHOD)
OF DETECTING A PRRSV)

#25
Reg. RCE
Filing
6.2.03

RECEIVED

MAY 30 2003

TECH CENTER 1600/2900

**REQUEST FOR CONTINUED EXAMINATION
TRANSMITTAL LETTER**

MAIL STOP RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



21839

Sir:

Applicants request continued examination under 37 C.F.R. § 1.114 and enclose the [] \$375.00 (2801) [X] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).

1. Applicants previously submitted the following document for which continued examination is requested:
 Consider the Amendment After Final Rejection 37 C.F.R. § 1.116 previously filed on April 18, 2003 and the Supplemental Information Disclosure Statement previously filed on May 19, 2003.
 Consider the arguments in the Appeal Brief or Reply Brief previously filed on ____.
 Other: _____
2. The following documents are enclosed with this submission:
 Amendment/Reply.
 Affidavit(s)/Declaration(s).
 Information Disclosure Statement (IDS).
 Other: Petition for a One-Month Extension of Time
3. [] Small entity status is hereby claimed.
 No additional claim fee is required.

Request for Continued Examination Transmittal Letter
 Application No. 09/810,501
 Attorney's Docket No. 033303-012
 Page 2

The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

C L A I M S					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS THUS PAID FOR	EXTRA CLAIMS	RATE	FEE
Basic Fee					\$750.00 (1001)
Total Claims	4	MINUS 38 =	0	× \$18.00 (1202) =	-0-
Independent Claims	2	MINUS 3 =	0	× \$84.00 (1201) =	-0-
If multiple dependent claims are presented, add \$280.00 (1203)					
Total Fee					\$750.00
If small entity status is claimed, subtract 50% of Total Fee					
TOTAL FEE DUE					\$750.00

4. A check in the amount of \$ 750.00 is enclosed for the fee due.

5. Charge \$ _____ to Deposit Account No. 02-4800 for the fee due.

6. Applicant(s) requests suspension of action by the Office until at least ___, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: May 27, 2003

By: Susan M. Burns *for* *Sharon E. Crane, Ph.D.* *Reg. No. 40,373*
 Registration No. 36,113

P.O. Box 1404
 Alexandria, Virginia 22313-1404
 (703) 836-6620